Report on the Inquiry into the
2001/2002 Draft Budget

Report No. 9 of the
Standing Committee on Health
and Community Care

March 2001
Resolution of Appointment

The following general purpose standing committees be established to inquire into and report on matters referred to it by the Assembly or, after the Assembly’s endorsement, matters that are considered by the committee to be of concern to the community.

... a Standing Committee on Health and Community Care to examine matters related to health and community care policy, planning and purchasing acute, community health and population health services, hospitals, housing and housing assistance and any other matter under the responsibility of the portfolio minister.


Amended on 7 December 2000, Minutes of Proceedings (2000), No. 110, p 1129

Terms of Reference

The ACT Legislative Assembly has resolved that the draft 2001/02 budgets for each department and agency be referred to the relevant general purpose standing committees of the Assembly. The terms of reference for the inquiry are as follows:

That notwithstanding the resolution of 28 April 1998, as amended on 25 November 1999 and 7 December 2000, which appointed the General Purpose Standing Committees for this Assembly:

1. the 2001-02 draft budget initiatives and the 2001-02 draft Capital Works Program for each appropriation unit be referred to the relevant General Purpose Standing Committee, for inquiry into and report by 23 March 2001 with either:
   (a) recommendations that maintain or improve the operating result; or
   (b) a conclusion that the committee will not proceed with the consideration of the 2001-2002 draft Budget initiatives and the 2001-02 draft Capital Works Program;

2. the relevant draft budget documents be provided by the Treasurer to the Presiding Member of each Standing Committee by the close of business Friday, 16 February 2001;

3. if the Assembly is not sitting when the Committees complete their inquiries, the Committee may send their reports to the Speaker or, in the absence of the Speaker, to the Deputy Speaker who is authorised to give direction for its printing, circulation and publication; and

4. the foregoing provisions of this resolution have effect notwithstanding anything contained in the standing orders.

Legislative Assembly for the ACT, Minutes of Proceedings (2001), No. 113, 15 February 2001, p 1178.
Committee Membership

Mr Bill Wood, MLA (Chairman)

Mr Dave Rugendyke, MLA (Deputy Chair)

Mrs Jacqui Burke, MLA

Secretary of the Committee: Mr David Skinner

Administrative Officer: Mrs Judy Moutia
Report on 2000/2001 Draft Budget

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SUMMARY OF RECOMMENDATIONS

Recommendation 1
The committee recommends that the Government inform the committee as to what community consultation it undertook in the planning of the budget and which groups it consulted.

Recommendation 2
The committee recommends that where proposals made to the committee are rejected by the Government, that it provide a written rationale to the Assembly and the submitter as to the basis of the rejection. Rationales should be comprehensive and address how funding decisions were reached as well as responding to each of the recommendations/proposals included in the body of this report made on behalf of community groups and other submitters - not just the recommendations made by the committee.

Recommendation 3
The committee recommends that the Government examine all the submissions made to this committee in relation to the draft budget and seriously re-consider its budget priorities in light of this examination.

Recommendation 4
The committee recommends that the Government take on board the recommendations made by ACT Shelter in relation to housing when determining budget priorities.

Recommendation 5
The committee recommends that the Government take on board the recommendations made by ACTCOSS in relation to housing when determining budget priorities.

Recommendation 6
The committee recommends that the Government take on board the recommendations made by the Youth Coalition in relation to housing when determining budget priorities.

Recommendation 7
The committee recommends that the Government seriously consider the proposal for an aquatic hoist when determining its budget priorities.
Recommendation 8
The committee recommends that the Government take into account the view of
the Women’s Centre for Health Matters’ regarding the allocation of funds
towards additional counselling and medical services.

Recommendation 9
The committee recommends that the Government examine and develop
proposals which encourage the uptake of exercise in the broader ACT
community.

Recommendation 10
The committee recommends that the Government seriously consider this
proposal when deliberating on its budget priorities.

Recommendation 11
The committee recommends that the Government take on board the
recommendations made by the Youth Coalition in relation to Indigenous health
when determining budget priorities.

Recommendation 12
The committee recommends that the Government take on board the
recommendations made by ACTCOSS in relation to Indigenous health in
determining its priorities.

Recommendation 13
The committee recommends that the Government seriously examine these
additional recommendations put by the Youth Coalition of the ACT when
determining budget priorities.

Recommendation 14
The committee recommends that the Government seriously consider the
recommendations put forward by ACROD ACT in relation to disabilities
services when determining budget priorities.

Recommendation 15
The committee recommends that the Government seriously consider the Spastic
Centre of NSW’s proposal in determining its budget priorities.

Recommendation 16
The committee recommends that the Government seriously consider the
proposal of the ACT Disability Advisory Council when determining budget
priorities.
**Recommendation 17**

The committee recommends that the Government seriously consider the MS Society’s proposals in determining its budget priorities.

**Recommendation 18**

The committee recommends that the Government seriously consider Marymead’s proposal in determining its budget priorities.

**Recommendation 19**

The committee recommends that the Government seriously consider the proposal of the Eden-Monaro Cancer Support Group when determining budget priorities.

**Recommendation 20**

The committee recommends that the Government seriously consider the proposals of the National Brain Injury Foundation in determining budget priorities.

**Recommendation 21**

The committee recommends that the Government consider the need to provide additional funds for improving the level and quality of respite services in the ACT.

**Recommendation 22**

The committee recommends that the Government consider the need to provide a scheme where aids (of the type described) for people with severe disabilities are available for hire.

**Recommendation 23**

The committee recommends that the Government consider the need to provide additional funds to the New Born and Parents Support Service in determining its budget priorities.
CHAPTER 1. ISSUES

1.1. The committee was asked by the Assembly to review the draft budget and capital works proposals of the Government. The committee called for submissions and received 14 submissions from individuals and groups.

1.2. The committee also received a briefing from the Government about its budget proposals.

1.3. The committee was informed during the process that an extra $1.2 million was available for appropriation as a result of positive Commonwealth Grants Commission findings.

1.4. A range of community views were expressed to the committee via written submission and the committee has attempted to reflect the spirit of those views in this brief report. The committee has intentionally kept its comments to a minimum so as to highlight the views of the community. The committee also trusts that the Government will review all the submissions1 as a means of informing its funding decisions via non-departmental sources and has made a recommendation to this effect below.

1.5. The committee wishes to note that it believes the vast majority of proposals outlined in submissions were very worthwhile and deserving.

1.6. The committee stands by many of the comments made in its last draft budget inquiry report about problems with the process but does not wish to reiterate all of them again – they well known and many still remain unaddressed. However, the committee wishes to make a couple of comments about the process.

1.7. One thing that the committee has recommended is that the Government provide the Assembly with written rationales as to why proposals put forward under this process have not been successful. The committee believes that this will assist community groups in the future with the preparation of submissions as well as ensuring that Government decisions are transparent and well-communicated to the community. Just as a job applicant expects feedback about an unsuccessful employment application, community groups too expect some statement as to why they are not successful in receiving funding or having their proposals adopted.

1.8. In a media release dated 14 March 2001, the Chief Minister argued that:

...the ACT Government's draft budget process - now in its second year of implementation - has been widely welcomed by community groups and other political forces, as a vital way to have input to budget policy.

1 A copy of all authorised submissions will be provided to the Government on Friday 23 March 2001.
"The ACT Government has been Australia's first to introduce this unprecedented level of community consultation. This is not political rhetoric - the draft budget process has been a huge winner for the community."

1.9. But the committee sees some confusion in the community as a result of the Government’s approach. The committee asks the Government what community consultation has been undertaken regarding the seeking of submissions in the planning of the budget. Indeed, has there been any comprehensive approach seeking responses in the planning of the draft budget?

1.10. A comprehensive submission has been received from ACTCOSS, as from other groups. Were these submissions also sent to the Government? Is Government passing over the responsibility for consultation to under-resourced Assembly committees?

**Recommendation 1**

The committee recommends that the Government inform the committee as to what community consultation it undertook in the planning of the budget and which groups it consulted.

1.11. The committee believes that it is obvious that not all community groups will fare well through this process, although some may. While consultation in the form of community input is an important part of the Government’s and the Assembly’s work, it is not a one way street. Having undertaken the draft budget consultation process, there is an onus on the Government to explain why some proposals were successful and others weren’t.

1.12. This is the second and equally important component of consultation – feedback. It is not good enough for the Government to seek the range of community views on the draft budget but then to determine funding priorities via an ‘invisible’ decision-making process. Feedback to submitters and the Assembly provides the circularity that effective community consultation demands. Certainly the community sector provide input but so far the Government provides little ‘output’ in the way of articulating the basis for funding decisions.

1.13. The committee does not believe its proposal places an unnecessary impost on Government but that it is merely a means of providing resolution to the process and closure for all the submitters who took the time to assist the Assembly and the Government in determining funding allocations. The committee cites its comments in last year’s draft budget report in this regard. The committee noted then that:

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3. Indeed, the committee understands that both the Department of Justice and Community Safety and the Department of Education provided written responses regarding submissions to the respective committees in last year’s draft budget process.
Without some generally accepted and publicly articulated rationale of how funding decisions are made, the committee was in the invidious position of being asked to alter priorities with no objective recourse with which to refute Government assertions that program ‘A’ is high priority and program ‘B’ is not.

On what basis could the committee have been able to question the validity of funding a particular area or how could the committee advocate funding for a program or service without such a framework of analysis? It is the committee’s view that the basis upon which funding allocations are made should be as transparent as the allocations themselves.

1.14. The proposal to require Government feedback on proposals and submissions is an important step to ensuring that true accountability, objectivity and community-involved decision making are properly implemented.

**Recommendation 2**

**The committee recommends that where proposals made to the committee are rejected by the Government, that it provide a written rationale to the Assembly and the submitter as to the basis of the rejection.**

Rationales should be comprehensive and address how funding decisions were reached as well as responding to each of the recommendations/proposals included in the body of this report made on behalf of community groups and other submitters - not just the recommendations made by the committee.

1.15. The committee was concerned that, as was the case last year, the timing of the draft process presented significant difficulties for both the committee and community groups in terms of responding to the stated priorities of the Government and suggesting alternative courses of action.

1.16. The committee also took note of the ACT Council of Social Services’ (ACTCOSS) comments about the problems presented by the manner in which the draft budget was undertaken. ACTCOSS noted that:

The Council’s Ability to comment on the Government’s draft measures has been limited by a lack of information. Without the publication of an entire draft budget, it is not possible to determine whether these measures represent new initiatives, whether they are merely existing initiatives renamed, or whether they are Commonwealth programs being implemented by the ACT. In addition, the Council does not know which programs may have been cut to fund these new initiatives. This is a critical issue, which severely compromises the Council’s ability to evaluate these measures.

The timing of the draft budget process has also presented a number of problems. It has been extremely difficult to adequately engage with and consult stakeholders in the limited period available between the release of the draft measures and the requirement to make submissions to the Government and the Legislative Assembly.

The process for the draft budget consultations has changed this year. These changes have not been well communicated by the Government and this has resulted in confusion within the community and lower levels of engagement with the draft budget process than would
otherwise be expected. Future draft budget processes need to be more clearly explained to the community. All of the issues outlined in this section have detracted from the value to the community of the draft budget process, and will need to be addressed next year⁴.

1.17. The committee supports these comments.

**Additional government proposals vis-à-vis community input**

1.18. In a private briefing with the Government, the Minister and his officials outlined a number of initiatives that it felt were priority areas of expenditure - useful ways of spending the additional $1.2 million.

1.19. Without outlining all those proposals in this report, the committee was generally supportive of the initiatives and thought that they all warranted serious consideration.

1.20. However, the committee believes that many of the groups and individuals making submissions to this inquiry are also deserving and, as stated above, the Government must be sure to examine and analyse as much information as possible when making funding decisions in the upcoming budget. The committee trusts that this report is a useful aid in helping the Government to make the best decisions about fulfilling unmet need, building capacity and ensuring that the needs of all people in the ACT are catered for within the broad parameters of the budget.

**Recommendation 3**

The committee recommends that the Government examine all the submissions made to this committee in relation to the draft budget and *seriously* re-consider its budget priorities in light of this examination.

**Housing**

Submission from ACT Shelter

1.21. The committee received a submission from ACT Shelter which outlined a range of sensible recommendations in relation to public housing policy which the committee has included for consideration by the Government.

1. That the ACT Government considers the impact of the lack of safe, secure, affordable and appropriate housing upon the building of social capital and adjusts its capital spending on the provision of public and community housing stock accordingly.

2. That ACT Housing reinstates and expands its tenant participation program and actively seeks to build partnerships with its tenants.

3. That ACT Housing adopt a more sensitive allocations policy which recognises the following:
   a) that single women are particularly vulnerable when housed on multi-unit sites;
   b) that single women should only be expected to accept accommodation in which

⁴ Submission 2, p 3.
they consider themselves to be safe; and that
c)Public and Community Housing allocation policies are reviewed, to ensure that prominence is given to tenants[\textsuperscript{1}] ability to actively participate in the community.

4. That the budget process allocate funds to reinstated the residential tenancy law reform process in order that lodgers, boarders, sharing arrangements and caravan park residents be adequately protected under the Residential Tenancy Act 1997 and that a review of the RTT be carried out to look at its processes and how these impact on its use by tenants.

5. ACT Shelter calls upon the Government to redress the funding loss to the Housing Assistance portfolio since 1996 and investigate innovative ideas for new mechanisms of raising revenue\textsuperscript{5}.

1.22. The committee supports these recommendations and asks that the Government act to implement them.

**Recommendation 4**

The committee recommends that the Government take on board the recommendations made by ACT Shelter in relation to housing when determining budget priorities.

**ACTCOSS**

1.23. A large part of the ACTCOSS submission to the committee was dedicated to analysing the problems confronting public housing policy and service delivery in the ACT. Of significant concern was the level of funding for public housing in the ACT. As its submission noted:

[A]… major theme of the Poverty Task Group's recommendations is increasing the size of the ACT housing stock to meet both long term and crisis accommodation needs. The Council strongly supports these recommendations. The inadequate size of affordable and appropriate housing in the ACT is the major causer of housing need in Canberra. It is also a significant factor behind the high numbers of people remaining in and returning to SAAP services. These services are already highly targeted and greater targeting of existing resources is not a workable solution. Addressing this stock shortfall is a critical policy challenge for the Government.

One of the principal barriers to increasing the size of the rental stock is funding. While the ACT Government needs to continue to lobby the Commonwealth Government for more housing funds, revenue measures that could be used to supplement existing housing funding need to be considered in this budget. These measures are detailed in the Council’s submission to the Standing Committee on Finance and Public Affairs, and include changes to land tax, change of use charge and rates\textsuperscript{6}.

1.24. ACTCOSS had numerous recommendations which the committee thought useful. They are included below.

\textsuperscript{5} Submission 1, p 8.
\textsuperscript{6} Submission 2 p 3.
ACTCOS recommended that:

1. The Government recognise the need to increase the size of the affordable housing stock in the ACT.

2. Developing options to increase affordable housing be a key agenda item for the Affordable Housing Task Group.

3. The Government consider changes to revenue that could supplement the existing housing budget in the ACT.

4. The Government establish and fund an Affordable Housing Task Group, as recommended by the Poverty Task Group.

5. The Affordable Housing Task Group examine tenure as part of its work plan.

6. The Government develop, in consultation with tenants and the community, a mechanism to assist all tenants facing eviction through rent arrears and debts.

7. The Government clearly and explicitly define the role of ACT Housing and fund the organisation appropriately.

8. The Government allocate more funds to ACT Housing to provide greater services to its tenants.

9. The Government adopt the recommendations of the Poverty Task Group to improve the relationships between ACT Housing and its clients.

10. Funds be directed towards researching the impacts of the ending of tenure for new ACT Housing residents and residents changing properties before this policy is implemented.

11. The Government not collect rent from the income of dependent children under the age of 25 in ACT Housing properties.

12. The Government allocate funding to review the Residential Tenancies Act.

13. The Government allocate additional funds to welfare rights and tenants advice services to allow tenants greater ability to access their legal rights.


15. Some of the proposed $10 million revenue ‘hand back’ be invested into increasing the stock of affordable housing in the ACT.

1.25. The committee supports these recommendations and urges the Government to implement them.
Recommendation 5

The committee recommends that the Government take on board the recommendations made by ACTCOSS in relation to housing when determining budget priorities.

Youth Coalition

1.26. A comprehensive submission from the Youth Coalition also provided some guidance in relation to housing issues.

1.27. The Coalition made the following recommendations:

Recommendation 36  
That the Government urgently consider providing increased funding for the provision of social housing in the ACT

Recommendation 37  
That the ACT Government allocate adequate resources for the implementation of the Youth Housing Taskforce Report Recommendations

Recommendation 38  
That the ACT Government resource research to assess the need and models of a ‘Youth Night Shelter’, with a commitment to funding the outcomes. Such research should be undertaken in consultation with young people and relevant community and government agencies, and explore existing models on a national level which are servicing this target group.\(^8\)

1.28. The committee supports these recommendations and urges the Government to implement them.

Recommendation 6

The committee recommends that the Government take on board the recommendations made by the Youth Coalition in relation to housing when determining budget priorities.

Portable aquatic hoist

1.29. The committee received a submission from Paul Osborne MLA putting the case for the installation of an aquatic hoist in the Erindale pool for people with disabilities.

1.30. Mr Osborne’s submission outlined a range of people that would benefit from such a hoist such as stroke victims, amputees, people with multiple sclerosis and

\(^{8}\) Submission 9, p 13.
people with chronic pain. The submission notes that there are only two such hoists available in the ACT and they are at The Canberra Hospital and the Kippax pool.

1.31. Prima Facie, there does seem to be a good case for having an aquatic hoist in the Tuggeranong area.

1.32. The committee supports the proposal and urges the government to investigate and implement the installation of an aquatic hoist in one of Tuggeranong’s public pools.

Recommendation 7

The committee recommends that the Government seriously consider the proposal for an aquatic hoist when determining its budget priorities.

Canberra Naltrexone Clinic

1.33. The committee received a submission from the proposed Canberra Naltrexone Clinic with a request for funding of $477,463 in this financial year and recurrent funding for three years after that to a similar tune.

1.34. The committee examined the group’s proposal and took evidence from the Chief Health Officer of the ACT, during the departmental briefing.

1.35. While the committee was impressed with the commitment of the Canberra Naltrexone Clinic, the committee is aware that there are significant concerns about the model being proposed by the Clinic in terms of its efficacy, safety and track record.

1.36. The Chief Health Officer of the ACT commented that:

This group has nothing like the medical expertise to run this program. They do have a doctor who is a registered medical practitioner. Beyond that, he has no qualifications, no academic or professional associations that tie him in with other people doing it. I would really counsel this group that they should stick with the volunteer and counselling end community support side of helping people with drug problems. And I should point out, too, they don’t have a track record of doing that of any great length, but I think that’s where they could really build up their work and [leave alone] the medical side of providing a quite dangerous procedure, [which] they are not equipped to do.

1.37. It is incumbent on the committee to heed this expert advice as being the best available advice and therefore is unable at this time to support the proposal put by the Clinic. The committee is aware of similar concerns held by drug and alcohol experts around the country. The committee will give Dr O’Neil, Perth doctor and originator of the model proposed by the Clinic, an opportunity to respond to the comments of the Chief Health Officer.

1.38. The committee believes that there is a role for Naltrexone in the treatment of heroin addiction. The committee understands that the views of the Government accord with those of the committee and therefore the committee makes no recommendation in this matter.
Women’s Counselling Services

1.39. The Government’s draft budget proposals include an initiative to provide additional counselling and specialised medical services for women.

1.40. In its submission, the Women’s Centre for Health Matters welcomes the initiative but questions whether the money should be split between additional medical services and additional counselling services. The Centre argues that while funding in both areas is important, by far the greater area of need is counselling services. The Centre notes that:

The ACT Women’s Action Plan 2000-01 does not specifically identify medical services for women as a priority need or action area. Whilst additional funds for specialised medical services for women would be welcome, the greater need is clearly for counselling services. We believe that funds allocated as part of this initiative to services other than counselling should be limited to the recommendation of the Women’s Action Plan to improve access to well women’s health services9.

1.41. The committee does not have a view in relation to this matter but trusts that the Centre is expressing a valid perspective which is tied into an existing strategic framework for women’s health. The committee notes that ACTCOSS also made a recommendation supporting the view of the Women’s Centre for Health Matters10. The committee sees that the Government should further discuss this proposed expenditure with stakeholders to ensure that they have got their priorities right.

Recommendation 8

The committee recommends that the Government take into account the view of the Women’s Centre for Health Matters’ regarding the allocation of funds towards additional counselling and medical services.

Fitness Initiatives

1.42. The committee received a submission from the Australian Council for Health, Physical Education and Recreation (ACHPER) regarding the lack of initiatives aimed at encouraging physical fitness.

1.43. In its submission, ACHPER argued that:

At a time when lack of regular, systematic and vigorous physical activity is causing an epidemic in poor health we believe it behoves the Department to spend some of its budget in such a way that people are encouraged to be more physically active. The Exercise Prescription stands head and shoulders above all other prescriptions for keeping fit and healthy.

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9 Submission 6, p 2.
10 Submission 2, p 18.
In its current format the budget has no provision for any such measures. Like most health budgets around the country its is an ill health budget\textsuperscript{11}.

1.44. The committee sees value in improving the means by which the ACT community is encouraged to engage in physical exercise. It is part of the broader philosophy that prevention is better than a cure. Exercise is widely regarded as producing decreases in morbidity and mortality rates and initiatives which see a greater uptake of exercise are to be encouraged.

1.45. ACHPER argue that, ‘it is timely for an initiative to bring members of the medical profession and the fitness profession closer together so that doctors can prescribe exercise in the knowledge that the prescription will be adopted by those most in need’\textsuperscript{12}.

1.46. The committee urges the Government to consider programs which work towards encouraging the uptake of exercise and physical fitness activities.

**Recommendation 9**

The committee recommends that the Government examine and develop proposals which encourage the uptake of exercise in the broader ACT community.

**Counselling for people with a mental illness**

1.47. The Mental Health Foundation ACT provided a submission to the committee in relation to the new initiative for providing additional counselling for women. The Foundation would like to see an allocation for men’s services in this area as well.

1.48. In its submission, the Foundation noted that:

This organisation applauds the inclusion of the item “Additional Counselling and Specialised Medical Services for Women” in the draft budget, but urges that the Assembly allocate a smaller but significant amount of additional funding in the Budget to cover the introduction of such services for men.

Across the Mental Health Foundation’s diverse operations, there has been general agreement from staff that access to low-cost counselling will make an enormous difference to the mental health of those in the low income bracket.

We wish to make it clear, however, that we do not see it at all desirable that funding for men’s counselling should be provided at the expense of that allocated in the Draft Budget for women. Their need is greater, but that of men cannot be ignored\textsuperscript{13}.

1.49. The committee agrees that in the interests of parity and the degree of unmet need in the sector, this is a worthwhile proposal.

\textsuperscript{11} Submission 7, p 1.
\textsuperscript{12} Submission 7, p 1.
\textsuperscript{13} Submission 8, p 1.
Recommendation 10

The committee recommends that the Government seriously consider this proposal when deliberating on its budget priorities.

Indigenous Health

1.50. The committee is currently in the process of conducting an inquiry into Aboriginal and Torres Strait Islander health in the ACT. The committee has become acutely aware of the severe health and social problems confronting Indigenous people in the ACT and is hoping to deliver its report in the near future. The committee has come to the view that an holistic and inter-sectoral approach is imperative in order to face the challenges that arise in the course of implementing Indigenous health programs.

1.51. A number of submissions to this inquiry raised proposals and recommendations aimed at improving Government service delivery and health policy in relation to Aboriginal and Torres Strait Islander people in the ACT.

Youth Coalition

1.52. The committee received a submission from the Youth Coalition of the ACT which made the following recommendations.

Recommendation 40

That the ACT Government, in consultation with the ACT Indigenous community, develop and resource a cross-portfolio strategy to address the current and future health and well-being needs of Indigenous children and young people. This should extend to addressing the over-representation of Indigenous children and young people in the care and protection system and in the youth justice system.

Recommendation 41

That the ACT Government set aside funds to resource any unmet need identified in the implementation of the ACT Aboriginal and Torres Strait Islander Regional Health Plan

Recommendation 42

That the ACT Government match Commonwealth funding to Winnunga Nimmityjah Health Service to enable the provision of a holistic health service to an increasing client group.

Recommendation 44

That the ACT Government engage with relevant Indigenous agencies to design holistic educational, preventative and early intervention programs, to engage Indigenous young people at risk of drug using and who are currently drug using.

Recommendation 45
That the ACT Government allocate funding for an Indigenous controlled detoxification and rehabilitation facility to be established for Indigenous young people (under 18 years) within the ACT.

1.53. The committee supports the thrust of these recommendations and urges the Government to see how some of these priorities may be addressed through additional funding allocations, support in kind and better targeting of programs.

1.54. A more thorough analysis of the issues confronting Indigenous people in the ACT will be provided in the committee’s upcoming report. The report will also suggest funding initiatives, program changes and better targeting of resources.

Recommendation 11

The committee recommends that the Government take on board the recommendations made by the Youth Coalition in relation to Indigenous health when determining budget priorities.

ACTCOSS

1.55. The ACTCOSS submission also made recommendations in relation to Indigenous health. They were:

ACTCOSS recommended:

Recommendation 17

That improving the state of Aboriginal and Torres Strait Islander health and wellbeing be a priority for health funding in 2001-02.

Recommendation 18

That resources be set aside to fund any unmet need identified in the implementation of the ACT Aboriginal and Torres Strait Islander Regional Health Plan.

Recommendation 19

That service delivery be primarily through Aboriginal and Torres Strait Islander managed health services.

Recommendation 20

That resources be committed to improving Indigenous access to mainstream health services in the ACT.

Recommendation 21

That greater commitment is given to data collection in mainstream health services to provide more reliable information on the health profile and health needs of Aboriginal and Torres Strait Islander people, and to assist in the planning and delivery of health services in the ACT.
Recommendation 23

That funding be made available for at least one additional Aboriginal sexual assault worker.\(^{14}\)

1.56. The committee supports these recommendations and urges the Government to examine them in its budgeting process.

Recommendation 12

The committee recommends that the Government take on board the recommendations made by ACTCOSS in relation to Indigenous health in determining its priorities.

Additional Youth Coalition proposals

1.57. The Youth Coalition submission contained proposals/recommendations relating to a range of areas in the health sector which are worthy of consideration.

1.58. They were:

Recommendation 46

That the ACT Government commit additional funds to the Child and Adolescent Mental Health Services (CAMHS) for the re-establishment of a multi-staffed Adolescent Outreach program to engage in early intervention and preventative work with young people (aged 12-2 years). The employment of the Indigenous workers and workers from non-English speaking backgrounds within this program should be a matter of priority.

Recommendation 48

That the ACT Government pursue accommodation options for young people with mental health problems using a partnership model involving a community housing agency and adolescent mental health support agencies (such a model exists for adults between Havelock Housing Association and Richmond Fellowship).

That the recommendations resulting from the national research project, ‘Accommodating Homeless Young People with Mental Health Issues’ (1999), particularly those relating to the provision of suitable accommodation options, be referred to the Youth Housing Taskforce for consideration.

Recommendation 49

That the Government resource a campaign to raise awareness and recognition of young carers through training of professionals, provision of legislation and development of services, in consultation with young carers and relevant community and government stakeholders.

1.59. The committee believes that these are worthwhile recommendations and urges the Government to examine them.

\(^{14}\) Submission 2, pp 15-17.
Recommendation 13

The committee recommends that the Government seriously examine these additional recommendations put by the Youth Coalition of the ACT when determining budget priorities.

Disability issues

Australian Council for the Rehabilitation of the Disabled (ACROD)

1.60. In a submission to the committee, ACROD welcomed the proposed additional funding of $2 million set aside for disability services but noted that this amount was not enough to keep up with demand for services. ACROD also identified other pressures on the system that required attention. ACROD argued that:

The ACT Government’s Budget Consultation Paper relating to Health Housing and Community Care has earmarked an additional $2m for disability services. This is for support for young people with disabilities leaving school, support for clients with high needs in residential care and unmet need. These are all areas identified by ACROD ACT and its members as needing significant additional resources. ACROD therefore welcomes the injection of funds in these areas. It notes however that $2m falls well short of the additional amount needed to provide an adequate level of resourcing to the disability sector. A further significant omission from the Budget Consultation Paper was recognition of the increased non-discretionary cost pressures on disability service providers and the allocation of resources to allow services to maintain existing levels of service provision.\(^{15}\)

1.61. ACROD put forward several useful recommendations which the committee has included below:

- That the 2001-2002 Budget provide for grants to disability service providers which reflect the real and unavoidable cost increase in the services being purchased and which bear a realistic relationship to the level of service being purchased.

- That non-government disability service providers which provide an essential service be funded for the full cost of the provision of that service.

- That the contract price for the provision of residential accommodation services to people with disabilities be negotiated by the Government with service providers having regard to the true cost of the provision of that service.

- That all essential elements of such residential accommodation services be fully funded by Government and that no further allocation of Government monies be allocated for assessment and monitoring purposes until this has occurred.

- That the division of funding for residential accommodation services between the government and non-government sectors be reviewed having regard to the variation in cost structures between the two sectors and the efficiencies which might flow from open contestability for the provision of supported accommodation places.

\(^{15}\) Submission 11, p 1.
• That the Government make use of existing services and new initiatives e.g. data collection by Health First and the Community Care Management Information System to identify specific levels and areas of unmet need and develop a plan to address those needs in a systematic way over the next five years.

• That additional funding be provided to alleviate the unmet need in the areas of residential accommodation services and individual support packages.

• That funding to reflect the expected increase in the population of people with disabilities should automatically be included in each budget.

• That additional funding for unmet need in the area of respite services be provided in this budget particularly to support the increased availability of out of home respite care.

• That the Government allocate additional funds over and above that already specified in the Budget Consultation Papers to the provision of public therapy services for people with disabilities in the ACT.

• That the Government progressively move towards ensuring the availability of public therapy services to all people who might benefit from those services. “Benefit” should be construed broadly to include those who might achieve an improvement of a condition, enhanced management of a condition or, avoidance of or reduction in deterioration of a condition.

1.62. The committee believes these are all worthwhile recommendations and urges the Government to closely examine them.

1.63. The committee does feel compelled to comment on one recommendation in particular - the recommendation regarding respite care services. The committee undertook an inquiry into respite services in the ACT last year and came to learn about the severe gaps in service provision and significant degree of unmet need. It seems that little has changed since the committee handed down its report on the matter and the committee believes that the Government must take immediate action to ensure that high quality and widely available respite care services are available to all of those people in the ACT who require them. The committee comments on this later in the report.

Recommendation 14

The committee recommends that the Government seriously consider the recommendations put forward by ACROD ACT in relation to disabilities services when determining budget priorities.

Spastic Centre of NSW

1.64. The Spastic Centre of NSW submitted a proposal to the committee seeking recurrent funding of $97,722 per annum to help support the provision of its services to ACT clients.

1.65. The Spastic Centre noted that:
As a result of discussions with key stakeholders in the ACT over the last 18 months (ACT Community Care, Child Health and Development Service, Independent Living Centre, Community Service Purchasing, Community Health and Disability Program), a general consensus has been formed regarding the future direction for The Spastic Centre in the ACT. In essence, it was agreed that Spastic Centre services should continue and be modelled on providing a specialist service which remains complimentary to existing ACT disability services and places a greater emphasis on skills transfer. The most desirable model for delivering this would be through a series of visiting workshops/clinics as well as providing targeted services for children visiting Sydney who require consultation with medical specialists. The cost to deliver such a model would be $177,048 per annum benefiting an anticipated 111 families.

The Spastic Centre contribution to this proposal would be $79,426 which includes coverage of all organisational overheads ($29,508) and a component of fundraising monies (49,918). The cost to the ACT, therefore would be $97,622 per annum with an average cost per client of $879. In addition to this support, short-term staff exchange arrangements could be also negotiated and ACT staff would be offered free attendance at The Spastic Centre’s Continuing Education days which are held 3 times per year.

The Centre’s submission outlines a quite cogent proposal for delivering these services and they are certainly worthy of further consideration given the pressing level of unmet need in the disability services area.

**Recommendation 15**

The committee recommends that the Government seriously consider the Spastic Centre of NSW’s proposal in determining its budget priorities.

ACT Disability Advisory Council

1.67. The committee received a submission from the ACT Disability Advisory Council regarding the implementation of a whole-of-government approach to providing services and facilities which are accessible to people with disabilities. The Council’s submission outlines the importance of implementing measures that were picked up in the ACT Strategic Plan for Disability Services in this regard.

1.68. The Council noted in its submission that:

An Access to Generic Services working group of the ACT Disability Advisory Council recommends that government contribute $20,000 to establish an Access to Government strategy. The money would support staff ASL to get the strategy underway. Council has a small budget of its own and we envisage that it will also contribute around $5,000 to the Strategy.

The Strategy would provide a planning framework to ensure that all ACT Government programs, services and facilities are accessible to people with disabilities and meet their responsibilities under the Commonwealth Disability Discrimination Act and the ACT Discrimination Act. The Strategy will ask that

16 Submission 12, p 2.
relevant agencies conduct and use audits to develop a series of specific
disability action plans which address broad criteria identified for access
across the ACT as well as key specific issues identified in that agencies audit.
The Action Plans will set specific timeframes and strategies. The Strategy will
also deal with purchasing issues\(^\text{17}\).

**Recommendation 16**

The committee recommends that the Government seriously consider the
proposal of the ACT Disability Advisory Council when determining budget
priorities.

**Multiple Sclerosis Society of the ACT Inc.**

1.69. The committee received a submission from the MS Society of the ACT
proposing that funds be applied to support the society in delivering valuable services
to people suffering from Multiple Sclerosis.

1.70. The Society note in its submission that:

The Multiple Sclerosis Society of the ACT Inc. has over 400 members, of which some
300 have MS. The Society provides a range of support services for people with MS,
including massage/body therapy, subsidising Homehelp, immunotherapy drug training
and support, contributing towards research into a cause and cure of MS, mobility and
other aids, respire care, literature and a monthly newsletter, and a range of outreach
services. The Society also services non-members who have a neurological disease.

The expenditure budget for the Society in 2000/2001 totals some $340,000, which
includes providing services to people with MS at a cost of $80,700, of which only $17082
is contributed by the ACT Government (5% or 21% respectively).

Unlike our sister Societies in the five states, which recovers the major portion of its costs
of servicing people with MS from Government(s), the ACT Society receives only minor
assistance from Government. In fact, the ACT Society relies on its own fundraising
efforts for 95% of its income\(^\text{18}\).

1.71. In its submission, the Society proposes that it receive funding in the budget of
$113,720 for the following purposes:

- Cover the total cost of servicing people with MS in the ACT region (some $83000,
includes provision of 3% cpi increase), and if possible, **additional amounts to:**

- Allow one outreach worker to work two days per week in lieu of one [day] at present,
which is costed at $8200 for a full year;

- Allow the immunotherapy nurse to work 25 hours per week in lieu of the current 19
[hours], which is costed at an additional $6200 for a full year;

\(^{17}\) Submission17, p 1.

\(^{18}\) Submission 14, p 1.
Standing Committee on Health and Community Care

- Fund our subsidy of $15 per client for an additional eight clients per week to allow them to receive massage/body therapy at Gloria McKerrow House, our HQ, which is costed at $5760 for 48 weeks; and

- Fund a subsidy of $55 per client for 16 clients who are less mobile to receive massages in their own home, a service currently not provided, which is costed at $10,560 for a full year.

1.72. The committee considers that this is a worthwhile expenditure of money and that the Government should look favourably upon the proposal.

Recommendation 17

The committee recommends that the Government seriously consider the MS Society’s proposals in determining its budget priorities.

Residential treatment for young people with aggressive and abusive patterns of behaviour

1.73. The committee received a submission from Marymead Child and Family Centre about the need for the establishment of a residential treatment program for young people who display aggressive and abusive patterns of behaviour.

1.74. In its submission, Marymead noted that:

It is hoped that the Commonwealth’s compensation to the ACT for the introduction of the goods-and-services tax will be viewed as an opportunity to allocate extra funding ($168,000 p.a. + $60,000 capital costs) to establish the proposed program. It is recommended that both the current capacity and flexibility of the HSP to tailor services to the individual needs of the young people be preserved. This is of particular importance in the ACT where the relatively small number of high risk youth means it is inadvisable that programs focus solely on the needs of a homogenous cohort. It is envisaged that the new HSP would consist of a residential facility for six (6) and other arrangements for five (5) young people19.

1.75. Marymead’s comprehensive submission outlines the importance of such a facility and argues a strong case for providing funding.

1.76. The committee considers that the Marymead proposal has merit and should be considered as a viable and important program for addressing the needs of young people with behavioural difficulties.

Recommendation 18

The committee recommends that the Government seriously consider Marymead’s proposal in determining its budget priorities.

19 Submission 13, p 1.
**ACT Eden-Monaro Cancer Support Group**

1.77. The committee received a submission from Paul Osborne MLA representing the case for the allocation of funds to the Eden-Monaro Cancer Support Group.

1.78. Mr Osborne notes in the submission that:

> The Group has always been staffed by part-time volunteers, but a continued rise in demand for their services has created pressure for paid full-time staff. At present, the need has become urgent. The Group has been radically effected [sic] by the introduction of the GST; not only through increased administration but also in the rise of such items as petrol and other goods and services that are paid for on behalf of families. Present part-time volunteer staff can simply no longer handle the work load required of them.

> I understand that the Group is in need of more than one full-time paid staff member, however, an approach is being made to both NSW and ACT Governments for funding. The cost of one staff member is $35,000 per annum and it is this amount that I bring to the committee for consideration\(^{20}\).

1.79. The committee is aware of the good work that the Group carries out in helping support people with cancer and their families and understands that about 80 percent of the Group’s activities are for Canberra families\(^{21}\).

1.80. The committee considers this a worthwhile proposal if it can assist the group in continuing its important activities.

**Recommendation 19**

The committee recommends that the Government seriously consider the proposal of the Eden-Monaro Cancer Support Group when determining budget priorities.

**National Brain Injury Foundation**

1.81. The committee received a submission from the National Brain Industry Foundation outlining its case for allocating funds to meet unmet need.

1.82. The Foundation noted that:

> The most effective means of moving towards the Foundation’s goal of addressing unmet needs is likely to be the employment of an additional person with training and experience in social work and administration. Such an appointment would enable us to provide support to people moving from Tanderra into accommodation in the community…

> A second way in which people living with brain injury in the ACT community will be significantly advantaged is by the availability of the Foundation’s hydrotherapy pool which will become operational in November/December, 2000. If the community is to

\(^{20}\) Submission 15, p 1.

\(^{21}\) Submission 15, p 1.
obtain the full benefit of this facility, some supplementation of NBIF income to meet the increases in operating costs (principally heating) that have occurred will be necessary\(^{22}\).

1.83. The Foundation submitted the following costings for meeting need in the services it provides.

Reasonable estimates of the additional annual income that NBIF would require to make a positive contribution to meeting the need…, assuming existing income sources are maintained, would be:

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary and on-cost of social work graduate</td>
<td>$45,000</td>
</tr>
<tr>
<td>Running costs and amortisation of motor vehicle</td>
<td>$15,000</td>
</tr>
<tr>
<td>Supplementation of heating costs of hydrotherapy pool</td>
<td>$15,000</td>
</tr>
<tr>
<td>Total</td>
<td>$75,000</td>
</tr>
</tbody>
</table>

1.84. The committee believes that these funding proposals are worthy of consideration by the Government.

**Recommendation 20**

_The committee recommends that the Government seriously consider the proposals of the National Brain Injury Foundation in determining budget priorities._

**Respite Care**

1.85. The committee produced a report last year on the significant degree of unmet need in the area of respite care.

1.86. The committee continues to receive anecdotal evidence that there is simply not enough respite care available for the people who require it. This leads to unnecessary hardship on the part of carers and those requiring care and the committee would like the Government to address the under-funding urgently.

1.87. Additional funds are required to meet the needs of people seeking respite services.

**Recommendation 21**

_The committee recommends that the Government consider the need to provide additional funds for improving the level and quality of respite services in the ACT._

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\(^{22}\) Submission 16, p 5.

\(^{23}\) Submission 6, p 6.
**Aids for people with disabilities**

1.88. Through the Chair, the committee received a further submission concerning the needs of severely disabled people. In the circumstances presented, a husband caring for a wife needing 24 hour care required an attachment to enable a wheelchair to move up and down stairs.

1.89. Aids of this nature cost approximately $11,000. It was acknowledged that the best means of making this available would be through a scheme where this and similar aids were available for hire.

**Recommendation 22**

The committee recommends that the Government consider the need to provide a scheme where aids (of the type described) for people with severe disabilities are available for hire.

**Premature babies**

1.90. The committee wished to mention the need to provide additional funds to support the important work of the New Born and Parents Support Service. The committee is aware of the valuable contribution which the service makes to assisting parents of premature babies and considers that additional funding may be warranted.

**Recommendation 23**

The committee recommends that the Government consider the need to provide additional funds to the New Born and Parents Support Service in determining its budget priorities.

Bill Wood MLA

Chairman
21 March 2001
APPENDIX A: LIST OF SUBMISSIONS

1. Reverend David Webster, ACT Shelter Inc.
2. Mr Daniel Stubbs, ACTCOSS
3. Mr Ian McClure, Canberra Naltrexone Clinic
4. Mr Paul Osborne MLA
5. Ms Meredith Hunter, Youth Coalition of the ACT
6. Ms Kim Werner, Women’s Centre for Health Matters
7. Mr John Miller, ACHPER
8. Mr Bob Beatty, Mental Health Foundation
9. Ms Meredith Hunter, Youth Coalition of the ACT
10. Mr Craig Wallace, ACT Disability Advisory Council
11. Ms Andrea Simmons, ACROD ACT
12. Mr Rob White, The Spastic Centre of NSW
13. Ms Sue Mickleburgh, Marymead
14. Mr Robbie Costmeyer, Multiple Sclerosis Society of the ACT
15. Mr Paul Osborne MLA on behalf of the Eden-Monaro Cancer Support Group
16. Dr Peter McCullagh, National Brain Injury foundation Inc.
17. Mr Craig Wallace, ACT Disability Advisory Council
APPENDIX B: WITNESSES BEFORE THE COMMITTEE

9 March 2001

1. Briefing with the Minister for Health, Housing and Community Care, and departmental officials representing the ACT Government.